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Effective on 12/08/2004.				Complete if Known					
Effective on 12/08/2004. Fee Sursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Num	ber	10/812,984			
FEET	RANSI	MITTA	\L	Filing Date			31, 2004		
	- EV 20	O.F.		First Named Inve	entor		NAKAYAN	MA	
For FY 2005				Examiner Name		T. Argenbright			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		3747			
TOTAL AMOUNT OF	FPAYMENT (\$	5) 120.00		Attorney Docket	No.	056207	7.50830C1		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other (please identify):									
Deposit Account Deposit Account Number: 05-1323  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULAT									
1. BASIC FILING,	•			DOLL FEEO		A AIN I A TIC	N FFF		
		G FEES Small Entity	SEA	RCH FEES Small Entity	EXA		ON FEES		
<b>Application Type</b>	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (	(\$)	Fee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	200		100		
Design	200	100	100	50	130		65 80		
Plant	200	100	300	150	160		80		
Reissue	300	150	500	250 0	60 0		300 0		
Provisional	200	100	0	U	U		U		
2. EXCESS CLAIM FEES  Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 100  Small Entity Fee (\$) Ee (\$) 25 200									
Multiple dependent			400	· · · · ·		B.O 141.	36	•	
Total Claims 7 - 2	<u>Extra (</u> 20 or HP =	<u>Claims</u> <u>Fe</u> x	<u>e (\$)</u> =	Fee Paid (\$)	F	<u>Multij</u> ee (\$)		<u>lent Claims</u> ee Paid (\$)	
HP = highest number Indep. Claims	er of total claims paid  Extra (  3 or HP =	for, if greater than	20 ee (\$)	Fee Paid (\$)					
HP = highest number	er of independent clai		iter than 3						
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Claims  - 100 = / 50 = (round up to a whole number) x = Fee (\$) = Fee Paid (\$)									
4. OTHER SHEET(S)									
Non-English Specification, \$130 fee (no small entity discount)									
Other: One-month Petition for Extension of Time \$120.00									
SUBMITTED BY	<b>)</b>	1							
Signature Legistry Mundener Registration No. (Attorney/Agent) 29,004							Telephone (202) 624-2500		
Name (Brint/Tyne)	Vincent I Sun	dordick					Date July	v 14. 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. QO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.